

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

ADDRESS (number and street)

7000 CARDINAL PLACE

Check if different  
than previously  
reported. (ACC)

DUBLIN

OH

43017

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00332833

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Quarterly Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2006

through

03

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES W. HOEBERLING

Signature of Treasurer

Electronically Filed by JAMES W. HOEBERLING

Date

04

06

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	3		0	1		2	0	0	6

To:

M	M		D	D		Y	Y	Y	Y
0	3		3	1		2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		282080.14
(b) Cash on Hand at Beginning of Reporting Period .....	314689.96	
(c) Total Receipts (from Line 19) .....	20630.74	48240.56
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	335320.70	330320.70
7. Total Disbursements (from Line 31) .....	8500.00	3500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	326820.70	326820.70
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	10531.62	17491.32
(i) Itemized (use Schedule A) .....	9339.54	28656.71
(ii) Unitemized .....	19871.16	46148.03
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	19871.16	46148.03
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	759.58	2092.53
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	20630.74	48240.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	20630.74	48240.56

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		8500.00	3500.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees .....		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		8500.00	3500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		8500.00	3500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	19871.16	46148.03
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19871.16	46148.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Brooke Alexy Mailing Address 15401 Oak Pond Lane City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Counsel, Asst General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 473.69			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72306 Amount of Each Receipt this Period 203.01 Receipt Payroll Deduction: (67.67- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Charles Artillio Mailing Address 14 Teal Drive City State Zip Code Langhorne PA 19047 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Bus Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 605.76			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72076 Amount of Each Receipt this Period 201.92 Receipt Payroll Deduction: (100.9- 6/Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Charles Artillio Mailing Address 14 Teal Drive City State Zip Code Langhorne PA 19047 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Bus Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.76			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60406.C72831 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (20.00- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

**424.93**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Cassandra Baker Mailing Address 1672 Barrington Rd City State Zip Code Upper Arlington OH 43221 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, State Govt Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 309.61		Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72257 Amount of Each Receipt this Period 132.69 Receipt Payroll Deduction: (44.23- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Porter Bertelson Mailing Address 6895 Macneil Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 243.81		Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72228 Amount of Each Receipt this Period 104.49 Receipt Payroll Deduction: (34.83- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Timothy Boes Mailing Address 103 La Trobe Ct City State Zip Code Southlake TX 76092 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Medication Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 584.57		Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72316 Amount of Each Receipt this Period 250.53 Receipt Payroll Deduction: (83.51- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		487.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Scott Bostick Mailing Address 1546 Vivaldi Drive City State Zip Code Cardiff CA 92007 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Gm-supply Chain Solution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72254 Amount of Each Receipt this Period 120.00 Receipt Payroll Deduction: (40.00- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Anne Bouchenoire Mailing Address 5772 Banavie Ct City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Global Branding Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 259.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72233 Amount of Each Receipt this Period 111.00 Receipt Payroll Deduction: (37.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Mark Branday Mailing Address 55 Island Blvd City State Zip Code Fox Island WA 98333 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Corp Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 206.36		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72216 Amount of Each Receipt this Period 88.44 Receipt Payroll Deduction: (29.48- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		319.44
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Cooney Mailing Address 555 Front Street # 2301 City San Diego State CA Zip Code 92101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.25		Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72293 Amount of Each Receipt this Period 152.25 Receipt Payroll Deduction: (50.75- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Jody Davids Mailing Address 7638 Red Bay Court City Dublin State OH Zip Code 43016 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Cio Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72291 Amount of Each Receipt this Period 150.00 Receipt Payroll Deduction: (50.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Ted Dibiase Mailing Address 4949 Chaddington Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Mgmt Advice/counsel Ctr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 413.14		Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72295 Amount of Each Receipt this Period 177.06 Receipt Payroll Deduction: (59.02- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		479.31
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 10 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Gary Dolch			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 8382 Deep Run			<b>Transaction ID:</b> 60308.C72234	
City State Zip Code Powell OH 43065			<b>Amount of Each Receipt this Period</b> 112.50	
FEC ID number of contributing federal political committee. <b>C</b>			<b>Receipt</b>	
Name of Employer Cardinal Health, Inc		Occupation Evp, Quality		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.50		
<b>B.</b> Full Name (Last, First, Middle Initial) Jo Anne Fasetti			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 6	
Mailing Address 1163 Vineyard Dr			<b>Transaction ID:</b> 60406.C72327	
City State Zip Code Gurnee IL 60031			<b>Amount of Each Receipt this Period</b> 134.34	
FEC ID number of contributing federal political committee. <b>C</b>			<b>Receipt</b>	
Name of Employer Cardinal Health, Inc		Occupation Svp, Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 313.46		
<b>C.</b> Full Name (Last, First, Middle Initial) Brendan Ford			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 798 Tweed Court			<b>Transaction ID:</b> 60308.C72074	
City State Zip Code Worthington OH 43085			<b>Amount of Each Receipt this Period</b> 300.00	
FEC ID number of contributing federal political committee. <b>C</b>			<b>Receipt</b>	
Name of Employer Cardinal Health, Inc		Occupation Evp, Corp Dev		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			546.84	
<b>TOTAL</b> This Period (last page this line number only) .....				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 11 / 28

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Giacalone Mailing Address 7471 Balfoure Circle City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Reg Affairs/chf Reg Cnsl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 269.92		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72236 Amount of Each Receipt this Period 115.68 Receipt Payroll Deduction: (38.56- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Debra Hadley Mailing Address 2698 Berwyn Road City State Zip Code Columbus OH 43221 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Dir, Community Aff/ Contribute Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72222 Amount of Each Receipt this Period 90.00 Receipt Payroll Deduction: (30.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) L Glenn Hall Mailing Address 12320 Alameda Trace Circle #1502 City State Zip Code Austin TX 78727 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 204.82		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72215 Amount of Each Receipt this Period 87.78 Receipt Payroll Deduction: (29.26- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		293.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Hartman Mailing Address 7677 Tartan Fields Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Corp Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 620.90		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72319 Amount of Each Receipt this Period 266.10 Receipt Payroll Deduction: (88.70- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Linda Harty Mailing Address 1761 Roxbury Rd City State Zip Code Columbus OH 43212 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Treasurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 724.15		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72077 Amount of Each Receipt this Period 310.35 Receipt Payroll Deduction: (103.4- 5/Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) James Hethcox Mailing Address 5442 Haverhill Drive City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Ctr Med Safe/clin Imprv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 228.83		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72226 Amount of Each Receipt this Period 98.07 Receipt Payroll Deduction: (32.69- /Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

674.52

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 28

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Robin Hoke		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 2134 Yorkshire Road		<b>Transaction ID:</b> 60308.C72237
City Columbus	State OH	Zip Code 43221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 118.68
Name of Employer Cardinal Health, Inc	Occupation Svp, Strategic Initiatives	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.16	Payroll Deduction: (39.56- /Pay Period )

<b>B.</b> Full Name (Last, First, Middle Initial) Remi Kajogbola		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 15751 Sheridan St #149		<b>Transaction ID:</b> 60308.C72261
City Fort Lauderdale	State FL	Zip Code 33331
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 149.61
Name of Employer Cardinal Health, Inc	Occupation Rvp, Corporate Solutions	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.09	Payroll Deduction: (49.87- /Pay Period )

<b>C.</b> Full Name (Last, First, Middle Initial) Ronald Labrum		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 1325 Canterbury Cir		<b>Transaction ID:</b> 60308.C72088
City Libertyville	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 348.00
Name of Employer Cardinal Health, Inc	Occupation Chmn/ceo, Supply Chain Svcs	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 812.00	Payroll Deduction: (116.0- 0/Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

616.29

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Frank Lafasto Mailing Address 1451 S Kurtis Lane City State Zip Code Lake Forest IL 60045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Org Effectiveness Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 861.28		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72097 Amount of Each Receipt this Period 369.12 Receipt Payroll Deduction: (123.0- 4/Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Steve Lawrence Mailing Address 4868 Carrigan Ridge City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Retail Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 348.81		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72260 Amount of Each Receipt this Period 149.49 Receipt Payroll Deduction: (49.83- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Frank Leo Mailing Address 7707 Oakridge Court City State Zip Code Crystal Lake IL 60012 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Pres, Group - Pts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72289 Amount of Each Receipt this Period 150.00 Receipt Payroll Deduction: (50.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		668.61
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 28

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Edwin Long Mailing Address 7417 Cascade Way City Gurnee State IL Zip Code 60031 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 221.34			Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72231 Amount of Each Receipt this Period 73.78 Receipt Payroll Deduction: (36.89- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Edwin Long Mailing Address 7417 Cascade Way City Gurnee State IL Zip Code 60031 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 239.79			Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60406.C72795 Amount of Each Receipt this Period 18.45 Receipt Payroll Deduction: (18.45- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Edwin Long Mailing Address 7417 Cascade Way City Gurnee State IL Zip Code 60031 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 303.12			Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60406.C72965 Amount of Each Receipt this Period 63.33 Receipt Payroll Deduction: (63.33- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			155.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 28

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Lynch Mailing Address 550 E Rosemary City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Group Pres, Mfg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1044.96			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72112 Amount of Each Receipt this Period 447.84 Receipt Payroll Deduction: (149.2-8/Pay Period)
<b>B.</b> Full Name (Last, First, Middle Initial) Samuel Manzanares Mailing Address 1205 Brown Ridge City El Paso State TX Zip Code 79912 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Qlty Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 279.66			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72258 Amount of Each Receipt this Period 93.22 Receipt Payroll Deduction: (46.61-/Pay Period)
<b>C.</b> Full Name (Last, First, Middle Initial) Samuel Manzanares Mailing Address 1205 Brown Ridge City El Paso State TX Zip Code 79912 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Qlty Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 333.51			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60406.C72955 Amount of Each Receipt this Period 53.85 Receipt Payroll Deduction: (53.85-/Pay Period)

SUBTOTAL of Receipts This Page (optional) .....

594.91

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Lindy Mc Lean Mailing Address 7272 Black Abbey Ct City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Mgr, Key Account Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 214.48		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72225 Amount of Each Receipt this Period 91.92 Receipt Payroll Deduction: (30.64- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Jose Mejorado Mailing Address 7656 Dianjou Dr. City State Zip Code El Paso TX 79912 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Mfg Convertors Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 208.32		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72217 Amount of Each Receipt this Period 89.28 Receipt Payroll Deduction: (29.76- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Mark Mitchell Mailing Address 6604 Cresent Lake Dr City State Zip Code Lakeland FL 33813 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems - Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 229.18		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72227 Amount of Each Receipt this Period 98.22 Receipt Payroll Deduction: (32.74- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		279.42
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Myers Mailing Address Po Box 230 Cardinal (mps) Expat City Waukegan State IL Zip Code 60079 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Gmd & Ceo, Singapore Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 677.74		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72325 Amount of Each Receipt this Period 290.46 Receipt Payroll Deduction: (96.82- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Frederick Nelson Mailing Address 7303 Deacon Court City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.07		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72230 Amount of Each Receipt this Period 108.03 Receipt Payroll Deduction: (36.01- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) William Owad Mailing Address 7558 Heatherwood Ln City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Operational Excellence Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 545.16		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72310 Amount of Each Receipt this Period 233.64 Receipt Payroll Deduction: (77.88- /Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

632.13

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Joseph Papa

Mailing Address One Deerhill Rd

City

Chester

State

NJ

Zip Code

07930

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cardinal Health, Inc

Occupation

Chairman/ceo, Pts

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

754.11

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 6

Transaction ID: 60308.C72078

Amount of Each Receipt this Period

323.19

Receipt

Payroll Deduction: (107.7-  
3/Pay Period)

Full Name (Last, First, Middle Initial)

B. Kevin Peters

Mailing Address 465 Fourth Fairway  
Drive

City

Roswell

State

GA

Zip Code

30076

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cardinal Health, Inc

Occupation

Svp, Corp Health Systems

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

334.74

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 6

Transaction ID: 60308.C72259

Amount of Each Receipt this Period

143.46

Receipt

Payroll Deduction: (47.82-  
/Pay Period)

Full Name (Last, First, Middle Initial)

C. George Plava

Mailing Address 3526 Pembroke Dr

City

Richmond

State

TX

Zip Code

77469

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cardinal Health, Inc

Occupation

Pres, Pharmacy Management

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

460.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 6

Transaction ID: 60308.C72305

Amount of Each Receipt this Period

197.40

Receipt

Payroll Deduction: (65.80-  
/Pay Period)

SUBTOTAL of Receipts This Page (optional) .....

664.05

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Sandra Rigopoulos

Mailing Address 307 S Hi Lusi Ave

City State Zip Code  
 Mt Prospect IL 60056

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cardinal Health, IncOccupation  
Vp, Vendor Mgmt & Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.70

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 3 / 2 0 0 6

Transaction ID: 60308.C72315

Amount of Each Receipt this Period

249.30

Receipt

Payroll Deduction: (83.10-  
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Ali Rizvi

Mailing Address 7740 Crenshaw Way

City State Zip Code  
 Las Vegas NV 89129

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cardinal Health, IncOccupation  
Vp, Gm - Cardinal West

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.57

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 3 / 2 0 0 6

Transaction ID: 60308.C72224

Amount of Each Receipt this Period

91.53

Receipt

Payroll Deduction: (30.51-  
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Mark Rosenbaum

Mailing Address 6565 Lockhart Lane

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cardinal Health, IncOccupation  
Pres, Ips Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1003.17

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 3 / 2 0 0 6

Transaction ID: 60308.C72111

Amount of Each Receipt this Period

429.93

Receipt

Payroll Deduction: (143.3-  
1/Pay Period)

SUBTOTAL of Receipts This Page (optional) .....

770.76

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 28

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Claudia Russell Mailing Address 5064 Seagrove Cove City San Diego State CA Zip Code 92130 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Mktg - Strategic Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 286.09			Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72256 Amount of Each Receipt this Period 122.61 Receipt Payroll Deduction: (40.87- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) James Saponaro Mailing Address 9392 Redan Court City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Svp, Business Units- Retail Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 606.06			Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72318 Amount of Each Receipt this Period 259.74 Receipt Payroll Deduction: (86.58- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Schindewolf Mailing Address 6507 Burning Tree City Mchenry State IL Zip Code 60050 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72223 Amount of Each Receipt this Period 90.00 Receipt Payroll Deduction: (30.00- /Pay Period )
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			472.35
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 28

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) David Schlotterbeck Mailing Address 12 Hermitage Lane City Laguna Niguel State CA Zip Code 92677 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Pres/ceo Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72075 Amount of Each Receipt this Period 300.00 Receipt Payroll Deduction: (100.0- 0/Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Jesse Sims Mailing Address 11014 Black Falls Ct City Sugar Land State TX Zip Code 77478 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Mgr, Service - Technical Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72290 Amount of Each Receipt this Period 150.00 Receipt Payroll Deduction: (50.00- /Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Cornell Stamoran Mailing Address 3 Matrick Court City Hillsborough State NJ Zip Code 08844 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Strategy & Bus Process Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 452.34		Date of Receipt MM / DD / YYYY 03 / 03 / 2006 <b>Transaction ID:</b> 60308.C72304 Amount of Each Receipt this Period 193.86 Receipt Payroll Deduction: (64.62- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) .....

**643.86**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Stauffer			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 10644 Dundee Ct			<b>Transaction ID:</b> 60308.C72294	
City State Zip Code Powell OH 43065			Amount of Each Receipt this Period 154.08	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp, Audit		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 359.52		
<b>B.</b> Full Name (Last, First, Middle Initial) Joseph Strack			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 29420 Cambridge Ct			<b>Transaction ID:</b> 60308.C72232	
City State Zip Code Agoura Hills CA 91301			Amount of Each Receipt this Period 111.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Rvp, Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 259.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas Stuart			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 2 Jonah Ct Po Box 615			<b>Transaction ID:</b> 60308.C72229	
City State Zip Code Peapack NJ 07977			Amount of Each Receipt this Period 105.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Pres, Oral Technologies		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00		

SUBTOTAL of Receipts This Page (optional) .....

370.08

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Walsh Mailing Address 8722 Sweetwater Ct City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Vp, Flight Ops/bus Cont Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 266.42		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72235 Amount of Each Receipt this Period 114.18 Receipt Payroll Deduction: (38.06- /Pay Period )
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Walter Mailing Address C/o Cardinal Health 7000 Cardinal Place City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Chairman/ceo Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1344.14		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72140 Amount of Each Receipt this Period 576.06 Receipt Payroll Deduction: (192.0- 2/Pay Period )
<b>C.</b> Full Name (Last, First, Middle Initial) Carole Watkins Mailing Address 1967 Woodlands Place City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cardinal Health, Inc Occupation Evp, Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60308.C72255 Amount of Each Receipt this Period 120.00 Receipt Payroll Deduction: (40.00- /Pay Period )

SUBTOTAL of Receipts This Page (optional) .....

810.24

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Curt Witte		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 6724 Perimeter Loop Rd #232		<b>Transaction ID:</b> 60308.C72317	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 256.92
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Mktg - Alt Care		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 599.48		
<b>B.</b> Full Name (Last, First, Middle Initial) Connie Woodburn		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address 9761 Erin Woods Dr		<b>Transaction ID:</b> 60308.C72098	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 370.23
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Prof & Gov't Rel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 863.87		
		Payroll Deduction: (85.64- /Pay Period )	
		Payroll Deduction: (123.4- 1/Pay Period )	

**SUBTOTAL** of Receipts This Page (optional) .....

627.15

**TOTAL** This Period (last page this line number only) .....

10531.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Comerica Bank		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6	
Mailing Address Po Box 75000 (mc 2250)		<b>Transaction ID:</b> 60308.C72326	
City Detroit	State MI	Zip Code 48275-2250	Amount of Each Receipt this Period 759.58
FEC ID number of contributing federal political committee. C		Interest Received	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Bank Aggregate Year-to-Date ▼ 2092.53		

**SUBTOTAL** of Receipts This Page (optional) .....

759.58

**TOTAL** This Period (last page this line number only) .....

759.58

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

**A.** Pryce for Congress

Mailing Address 145 E. Rich Street

City  
Columbus

State  
OH

Zip Code  
43215-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name  
DEBORAH D. PRYCE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 60308.E697

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B.** Pryce for Congress

Mailing Address 145 E. Rich Street

City  
Columbus

State  
OH

Zip Code  
43215-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name  
DEBORAH D. PRYCE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 60308.E698

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3500.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C.** Pryce for Congress

Mailing Address 145 E. Rich Street

City  
Columbus

State  
OH

Zip Code  
43215-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name  
DEBORAH D. PRYCE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 60406.E700

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

DIRECT CONTRIBUTION

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

**A.** Voinovich for Senate

Mailing Address 865 Macon Alley

City  
Columbus

State  
OH

Zip Code  
43206-

Purpose of Disbursement  
DIRECT CONTRIBUTION

Candidate Name  
GEORGE V VOINOVICH

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 00

Transaction ID: 60308.E696

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

DIRECT CONTRIBUTION

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

8500.00